

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIED	RSD		11/12/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		71471	1/3

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	10/10/00
2	10/10/00
3	10/10/00
4	10/10/00
5	10/10/00
6	10/10/00
7	10/10/00
8	10/10/00
9	10/10/00
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50	10/10/00

Claim	Date
Final	
Original	
51	10/10/00
52	10/10/00
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100	10/10/00

Claim	Date
Final	
Original	
101	10/10/00
102	10/10/00
103	10/10/00
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147	10/10/00
148	10/10/00
149	10/10/00
150	10/10/00

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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